

State of South Dakota

EIGHTY-FOURTH SESSION LEGISLATIVE ASSEMBLY, 2009

346Q0597

HOUSE CONCURRENT RESOLUTION NO. **1004**

Introduced by: Representatives Curd, Cutler, Dreyer, Hoffman, Lust, Novstrup (David), Olson (Ryan), Peters, Rausch, Rave, Schlekeway, Solum, and Thompson and Senators Dempster and Adelstein

1 A CONCURRENT RESOLUTION, Urging Congress to reauthorize the State Children's Health
2 Insurance Program.

3 WHEREAS, the State Children's Health Insurance Program (SCHIP) was initially passed
4 in 1997, under a new Title XXI of the Federal Social Security Act, and included ten year
5 authorization and funding; and

6 WHEREAS, SCHIP was created to provide coverage to uninsured children in families with
7 income too great to qualify for Medicaid, but too little to purchase private or employer-
8 sponsored health insurance; and

9 WHEREAS, over the past decade, SCHIP has succeeded in providing millions of children
10 and youth across the country with access to affordable health care coverage, currently providing
11 health care to more than six million children annually; and

12 WHEREAS, in South Dakota alone, SCHIP has provided access to health care coverage to
13 more than eleven thousand children in fiscal year 2008; and

14 WHEREAS, SCHIP is vitally important in preserving child wellness, preventing and



1 treating childhood disease, and reducing overall health care costs; and

2 WHEREAS, SCHIP is a program in which states and the federal government have worked
3 together to provide health care coverage to children; and

4 WHEREAS, SCHIP must be reauthorized by Congress for federal funding to continue:

5 NOW, THEREFORE, BE IT RESOLVED, by the House of Representatives of the Eighty-
6 fourth Legislature of the State of South Dakota, the Senate concurring therein, that the
7 Legislature urges the members of Congress to reauthorize the State Children's Health Insurance
8 Program so that the states and the federal government can continue the financial partnership
9 providing access to affordable health care coverage for children, and to reauthorize the program
10 without extraneous provisions that are likely to cause delay.